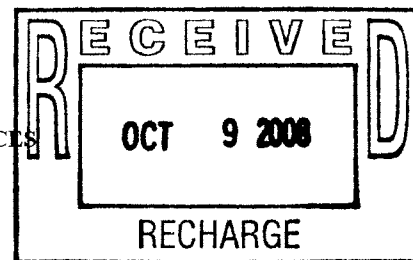


ARIZONA DEPARTMENT OF WATER RESOURCES
Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105
Phone (602) 771-8585 Fax (602) 771-8689



Modification to Recovery Well Permit #74-584461

APPLICATION FOR A RECOVERY
WELL PERMIT (§ 45-834.01)

APPLICATION FEE OF \$ 50.00 PER WELL FOR
THE 1ST 10 WELLS PLUS \$ 10.00 PER WELL
THEREAFTER IS DUE UPON FILING.

PERMIT FEE (SAME AS APPLICATION FEES), PLUS
NOTICE AND PUBLICATION FEES TO BE DETERMINED,
ARE DUE PRIOR TO ISSUANCE OF PERMIT.

PLEASE SUBMIT ONE ORIGINAL AND TWO COPIES OF THE
COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

FOR OFFICE USE ONLY	
Application No.:	74-584461.0003
Date Received:	10-9-08

- Name of Applicant: The City of Chandler
Mail stop 404, PO Box 4008 Chandler AZ 85244-4008
Mailing Address City State Zip
Contact Person Gregg Capps Telephone (480) 782-3585 Fax (480) 782-3805
- Name of Active Management Area or Irrigation Non-Expansion Area if applicable, and name of groundwater basin and subbasin where the facility will be located Phoenix AMA, Salt River Valley Basin,
East Salt River Valley sub-basin
- Name of the owner(s) of the land where wellsites are located City of Chandler
Mailing Address Mail stop 404, PO Box 4008, Chandler, AZ 85244-4008
(If more than one owner, attach a list showing corresponding land owner and well registration number(s)).
- Legal description of the land where water will be used Within the City of Chandler Water Service Area.
(quarter/quarter/quarter/section, township and range)
- The recovered water will be used for Municipal and Industrial Purposes

**All City of Chandler
Water Storage Permits**

6. The recovery wells will be used to recover water stored pursuant to Water Storage Permit No. 70-441129
or long-term storage account number. _____

7. Complete the following for each constructed well. If data supplied differs from the ADWR well registry, please submit a change of well information form. Attach supplement if needed.

Name of Well Owner	Well Registration Number	Location: ¼, ¼, ¼, Section, Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (inches)	Proposed Annual Volume (Acre-feet)	Date Well Constructed
City of Chandler	55-216246	SW, SW, NE, 10, T2S R5E	1,500	458	18.625	2,420	12/4/2007
City of Chandler	55-216255	NW, NW, NE, 10, T2S R5E	1,500	450	18.625	2,420	1/11/2008

8. Complete the following for each proposed well to be constructed.

Well Registration Number	Location: ¼, ¼, ¼, Section, Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (inches)	Proposed Annual Volume (Acre-feet)	Estimated Date of New Well Construction	Estimated Time Required To Complete Well
N/A							

I (We), The City of Chandler, the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.

(480) 782-3585
Telephone

Greg M. Capp
Signature of owner or authorized agent

Water Resource Manager

Title

Mail stop 404, PO Box 4008 Chandler AZ 85244-4008
Mailing Address City State Zip

STATE OF ARIZONA)
County of Maricopa) ss.

Subscribed and sworn to before me this 19 day of September, 2008.

Lexie D. Rosenfield
Notary Public

March 18, 2011
My commission expires:

